

## Kentucky Voices for Health Update – 3/4/11

In honor of National Colorectal Cancer Awareness Month and Friday's *Dress in Blue Day*, the weekly update is going *blue* to raise awareness about this preventable disease and to increase colon cancer screening. To learn more, visit the Kentucky Cancer Program web sites at <http://www.kycancerprogram.org/special-events> and <http://www.kcp.uky.edu/colon-toolkit.html>

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### **Legislative Updates (health-related legislation)**

#### *Passed House*

- HB 42 (HCS), relating to out of state provider of DME
- SB 40, expand practice of pharmacy for flu vaccines for children ages 9-13 (enrolled)
- SB 63 (w/amendment), relating to setting goals/benchmarks to reduce diabetes
- SB 71, relating to diabetes educators (enrolled)
- SB 112, relating to occupational and physical therapy (enrolled)
- SB 114, relating to health benefit plans incentives for wellness programs (enrolled)

*House Concurred:* HB 52, HB 247, HB 264, HB 311

*House Did Not Concur with Senate Substitute:* HB 305 (SCS)

#### *Passed Senate*

- SB 75 (SCS), relating to chiropractic
- SB 126, relating to prescription assistance in KY Physicians Care Program
- HB 52 (SCS), relating to elder and vulnerable adult abuse (enrolled)
- HB 247 (SCS), relating to radon mitigation (enrolled)
- HB 255, relating to a health insurance tax exclusion (enrolled)
- HB 264 (SCS), establish the Technical Advisory Committee (TAC) on Behavioral Health, the TAC on Children's Health, and the TAC on Intellectual and Developmental Disabilities (enrolled)
- HB 278, relating to nurse education (enrolled)
- HB 305 (SCS), relating to Medicaid budget

HB 311, to permit electronic prescriptions for methamphetamine and Schedule II controlled substances (enrolled)

HB 442, relating to nurse licensure (enrolled)

HB 463, relating to criminal justice reform (enrolled and signed into law)

HCR 13, establish the Legislative Task Force on Childhood Obesity; require the task force to report any recommendations and findings by November 30, 2011 (enrolled)

HCR 114, urging greater awareness on use of medical alert bands by persons using blood thinners to prevent fatal head injuries

SR 101, honoring the service of Howard Bracco, Seven Counties Services

*Senate Concurred:* SB 63

*Signed into Law:* HB 463

### **Conference Committee Begins on HB 305**

A conference committee of House and Senate leaders was named on Friday to resolve the differences in the House and Senate approaches to balancing the Medicaid budget. They met on Friday evening and will resume deliberations on Monday. The Conference Committee includes:

Senate: Williams, Stine, Stivers, Seum, Gibson, Palmer, Turner, Rhoads, Leeper, Harris, Jones, Denton, Buford

House: Rand, Stumbo, Adkins, Clark, Damron, Thompson, Hoover, DeWeese, Ford, J. Lee

HB 305 which, as passed by the Democrat-controlled House last month, would enact Gov. Beshear's plan to plug a funding hole in the current Medicaid budget with \$166.5 million budgeted for the program in the 2011-12 fiscal year, which begins July 1. Beshear promised in turn to find savings of \$166.5 million in next year's Medicaid budget by contracting out certain aspects and services of the program. Requests for Information (RFIs) were sent out in 7 different areas of Medicaid program and management and replies are currently being studied by the Cabinet. The Requests for Proposal (RFPs) have not yet been issued.

But Republicans who control the Senate say that they can't accept Beshear's promise of future savings and that the state must cut spending now to be certain budget problems don't grow worse. The Senate plan calls for cutting state funding to all agencies by about one-half of 1 percent in the final quarter of this fiscal year, and by about 2 ¼ percent in 2011-12. Republicans also voiced concern that the RFIs seek a fragmented approach to managed care and would result in a flawed system.

A concern of KVH stakeholders with the Senate proposal is the inclusion of a provision that would reinstate the face-to-face interviews for Medicaid and KCHIP. Only two states currently require face-to-face interviews. This does not help Kentucky families who are struggling in a tough economy. There is no relationship between making people appear in person and reducing fraud. Use of automated systems and data matching reduces error rates. This provision may also jeopardize federal matching dollars as a violation of the Maintenance of Effort provision in federal law.

### **Penal Code Reform Bill Signed Into Law**

Governor Beshear signed HB 463 into law on Thursday. This landmark justice reform bill is designed to decrease the state's prison population, reduce incarceration costs, reduce crime and increase public safety. HB 463 is estimated to save the Commonwealth \$422 million over the next decade. The bill is the culmination of years of study and work to solve a complex problem: out-of-control corrections costs. The bill modernizes Kentucky drug laws by reducing prison time for low-risk, non-violent drug offenders who possess small amounts of illegal drugs. It then reinvests the savings from the reduced prison costs into drug treatment opportunities for offenders who need help. The law also strengthens probation and parole laws by basing key decisions on the risk posed by offenders and improving supervision, and links offenders to appropriate community resources.

### **Republican Governors want Medicaid block grants**

Republican governors went to Washington this week with a strong message on Medicaid: It's time for more

flexibility in how federal dollars in the state-administered entitlement program are spent. Republicans coalesced around Medicaid block grants — capped funding that states control — as the best path forward during a National Governors Association meeting Sunday. The Republican talking point on flexibility has shifted away from Maintenance of Effort waivers to block grants. Governors see the capped grants — a shift from the traditional pay-per-service reimbursements — as a bargaining chip to gain more control over their Medicaid state plans.

Republican governors are pushing block grants as a means to gain more control over their increasingly stressed Medicaid budgets. States' expenditures for the program are expected to grow by 9.4 percent annually between 2010 and 2019, according to a new analysis of Medicaid actuary data by the American Action Forum.

The idea of allowing states the wide-reaching ability to modify benefits worries Democratic governors. They contend that if the federal government gives up too much in benefit negotiations — such as over modifying health reform's requirement that states not pare back eligibility before the Medicaid expansion in 2014 — the program could essentially be gutted.

Democratic governors have pushed for Medicaid reforms that do not require block-grant funding. In New York, for example, Gov. Andrew Cuomo is looking to limit the growth of Medicaid spending by reducing provider payment rates. Massachusetts Gov. Deval Patrick, recently unveiled a new payment reform plan that would change the way providers are reimbursed. Republicans have often derided Massachusetts's health reform as unsustainable; pointing to its rapidly rising costs, but Patrick has said that cost control is the second phase in the state's reforms.

On Monday, February 28, President Obama reiterated his belief that States should have the power and flexibility to innovate and find the health care solutions that work best for them and announced his support for accelerating State Innovation Waivers and allowing states to apply for them starting in 2014. See:

- [http://www.whitehouse.gov/sites/default/files/wyden\\_brown\\_fact\\_sheet.pdf](http://www.whitehouse.gov/sites/default/files/wyden_brown_fact_sheet.pdf)
- Governors' Wish List For Medicaid – (Governor Beshear spotlighted)  
<http://www.kaiserhealthnews.org/Stories/2011/February/25/governors-and-Medicaid.aspx>

When President Barack Obama was asked about the Republican Governors' proposal Monday during a closed question-and-answer session with governors, a senior administration official who was present said he remarked that “while we need to find a more sustainable path to Medicaid,” he is concerned “that a block grant would make children vulnerable.”

The president asked governors to form a bipartisan group to work with Health and Human Services Secretary Kathleen Sebelius on ideas to reduce Medicaid costs while covering the same number of people. During the Q & A, Obama signaled that savings could be found by better managing the 5 percent of beneficiaries who account for 50 percent of the program's costs.

The Center for Budget and Policy Priorities released the following report –  
[Medicaid Block Grant Would Shift Financial Risks and Costs to States](#)  
[States Would Bear Impact of Recessions, Higher Medical Costs](#)

### **New Support for Medicaid Advocates**

State Medicaid programs are facing both challenges and opportunities when it comes to providing home and community-based services for older adults and people with disabilities. While Medicaid budgets face severe cuts, the Affordable Care Act offers new options to support individuals at home, instead of in institutions. The National Council on Aging (NCOA) is leading a national effort to help state advocates navigate both issues. Last week, NCOA hosted a webinar on state budgets that attracted more than 500 advocates and NCOA is also providing resources and a new online community. [Get tools to protect Medicaid »](#)

### **IOM Holding 2<sup>nd</sup> Meeting on Essential Benefits**

IOM is in the middle of its second meeting on essential benefits and heard from insurers, state agencies, academics and federal benefits on how to write its methodology. The committee heard from California, Oregon and Washington state agencies on their experience determining essential benefit packages. It's not just what

states cover, but how they structure cost-sharing that is also going to be important - and an issue that representatives from the Commonwealth Fund and AHRQ hit on. There was considerable discussion on how, especially for the expanded population up to 133 percent of the federal poverty line, the state is going to have to use the essential benefits package and what additional costs that would entail. For more information on these meetings, see <http://www.iom.edu/Activities/HealthServices/EssentialHealthBenefits.aspx>.

#### **Center for Medicaid, CHIP and Survey & Certification Informational Bulletin – ATTACHED**

Announcements related to recently released rules, grants and guidance: Community First Choice proposed rule, Money Follows the Person Grants, Medicaid Prevention Grants and the Maintenance of Effort State Medicaid Director's letter and Qs and As.

#### **Grants Available for Medicaid Incentives for Prevention of Chronic Diseases**

The Centers for Medicare & Medicaid Services (CMS) is inviting proposals from States to compete for grant awards for the legislatively-mandated Medicaid Incentives for Prevention of Chronic Diseases Program. "The CMS is conducting a nationwide program to test and evaluate the effectiveness of a program to provide financial and non-financial incentives to Medicaid beneficiaries of all ages who participate in prevention programs and demonstrate changes in health risk and outcomes, including the adoption of healthy behaviors. The Office of the Governor or the State Medicaid Agency may apply for funding under this grant opportunity. CMS will accept only one application per State; therefore we encourage State offices and agencies to work collaboratively to develop one application packet. State Notices of Intent are due to CMS by April 4th, with complete Grant Applications due by May 2<sup>nd</sup>. For details:

[http://www.cms.gov/MIPCD/Downloads/HHS\\_ACA\\_S4108\\_Solicitation.pdf](http://www.cms.gov/MIPCD/Downloads/HHS_ACA_S4108_Solicitation.pdf)

#### **Health Center Planning Grants Available**

Description: The purpose of planning grants is to demonstrate the need for health services in the community from public or non-profit organizations seeking a grant to plan for the development of a comprehensive primary care health center under the Health Center Program authorized under Section 330 of the Public Health Service Act. The purpose of the Health Center Program is to extend comprehensive primary and preventive health services (including mental health, substance abuse and oral health services) and supplemental services to populations currently without access to such services, and to improve their health status.

Link to Full Announcement: [LINK TO FULL ANNOUNCEMENT](#)

Last Day to Apply: March 18, 2011 - Number of Grants Available: 125

#### **Report: Affordable Care Act controls costs for early retiree coverage**

Health and Human Services Secretary Kathleen Sebelius today released a new report showing that the Early Retiree Reinsurance Program (ERRP) created by the Affordable Care Act is reducing health care costs for early retirees. As of December 31, 2010, more than 5,000 employers had been accepted into ERRP, more than \$535 million in health benefit costs have been reimbursed through the program, and those payments have helped benefit more than 4.5 million Americans.

**Implementation of Affordable Care Act in Kentucky** – For a status on implementation of ACA in the Commonwealth, see <http://www.healthcare.gov/center/states/ky.html>.

#### **KVH Nominated for MediStar Award**

Kentucky Voices for Health has been nominated for a 2011 MediStar Awards. The MediStar Awards is an honorary program of Medical News who seeks to recognize those who have significantly contributed to the healthcare community. In addition to KVH, Sheila Schuster and Luke Barlowe have also been nominated as individuals for their steadfast work in the health advocacy community. Please visit the [Medical News website](#) to see the entire list of nominees. Medical News will recognize eight outstanding healthcare programs and feature the best networking in Kentucky and Southern Indiana at an awards presentation and reception on March 29 at the Louisville Marriott. See [2011 MediStar Awards](#) for more information and to purchase tickets/table.

#### **Other Items of Interest**

### **Conference Calls on CHIPRA Outreach and Enrollment Grants**

Wednesday, March 9<sup>th</sup>, 2:00pm EST: CALL-IN #: 1-877-267-1577 Meeting ID: 0107

The Centers for Medicare & Medicaid Services (CMS) released a solicitation for the second round of \$40 million in grants to support outreach activities and strategies to enroll eligible children in Medicaid and CHIP and keep them enrolled as long as they qualify. States, local governments, community-based and nonprofit organizations, schools, health care providers, Indian tribes and others are encouraged to apply. Grants will range from \$200,000 to \$1 million for Focus Areas 2 - 5, and up to \$2.5 million for Focus Area 1. Funding will cover activities over a two-year period from August 2011 through July 2013. Applications are due on April 18<sup>th</sup>, 2011 and must be submitted through [www.grants.gov](http://www.grants.gov). CMS plans to announce the awards by July 30, 2011. To view the full solicitation, please [click here](#). Questions about the grants may be directed to [CHIPRAOutreachGrants@cms.hhs.gov](mailto:CHIPRAOutreachGrants@cms.hhs.gov).

### **Faith Based Community Hosts Conference Calls**

The Partnership Center is hosting conference call tours of [HealthCare.gov](http://HealthCare.gov) and [CuidadoDeSalud.gov](http://CuidadoDeSalud.gov) for faith and community leaders. Help your community members take advantage of these innovative websites, which give consumers the tools to compare insurance plans specific to their life situations and local communities, and identify the ones that meet their needs.

- Thursday, March 3<sup>rd</sup>, 4:00pm EST: Conference Call tour – in Spanish – of [CuidadoDeSalud.gov](http://CuidadoDeSalud.gov). Call-in #: 1-888-323-9813.
- Thursday, March 10<sup>th</sup>, 4:00pm EST: Conference Call tour of [HealthCare.gov](http://HealthCare.gov). Call-in #: 1-888-323-9813.

### **National Nutrition Month ®**

Learn about healthy eating from the American Dietetic Association [and steps to take now](#) to improve your total diet. Read about the [Dietary Guidelines for Americans, 2010](#), from the Office of Disease Prevention and Health Promotion. Get information on the top five reasons to [prepare meals at home](#), according to the [NIH Division of Nutrition Research Coordination](#).

### **National School Lunch Program and School Breakfast Program**

The U.S. Department of Agriculture announced a proposed rule revising the nutrition requirements for the National School Lunch Program and School Breakfast Program. The recently signed into law *Healthy, Hunger-Free Kids Act* called for such action. "This proposed rule would increase the availability of fruits, vegetables, whole grains, and fat-free and low-fat fluid milk in school meals; reduce the levels of sodium and saturated fat in meals; and help meet the nutrition needs of school children within their calorie requirements. Implementation of this proposed rule would result in more nutritious school meals that improve the dietary habits of school children and protect their health. The docket is open for public comments through **April 13<sup>th</sup>**. <http://edocket.access.gpo.gov/2011/pdf/2011-485.pdf>

### **Survey Finds Healthy Foods Difficult to Access for Many**

The 2010 Kentucky Health Issues Poll surveyed Kentuckians about their ability to get healthy foods for their families. While most people have adequate access to fresh fruits and vegetables, this is a significant concern for too many Kentucky families. The Poll found that:

- 1 in 5 Kentucky adults (21%) said it was not easy to get affordable fruits and vegetables where they live.
- 4 in 10 Kentucky adults (41%) were worried about having enough money to buy nutritious meals to feed their families.

One in three low-income Kentuckians (those earning less than the federal poverty guidelines, or less than \$22,050 for a family of 4) reported it is difficult for them to get affordable fresh fruits and vegetables.

View the full Kentucky Health Issues Poll report on [Kentuckians' Experiences with Buying Healthy Foods](#) here. Visit Kentucky Health Facts ([www.kentuckyhealthfacts.org](http://www.kentuckyhealthfacts.org)) to access key health data for Kentucky communities. To review additional information about opportunities and resources offered by the Foundation, check out our website: [www.healthy-ky.org](http://www.healthy-ky.org).



## **Online Coalition of Doctors, Nurses And Pharmacists Answers Questions About Health-Care Law**

At a time when many Americans are confused about the healthcare overhaul law, a coalition of groups representing doctors, nurses, pharmacists and consumers has launched a website to answer questions about the Affordable Care Act. The new website — HealthCareandYou.org — doesn't delve into the politics behind the law, but spells out what the law means to consumers, depending on the state they live in and their age. The website also provides a timeline, telling consumers when different parts of the law go into effect.

## **New Resources from Families USA and Stand Up for Health Care**

- ["Defunding" the Affordable Care Act: Guilty of a Double Standard](#)
- [Selecting Plans to Participate in an Exchange: A State Guide](#)
- [Worry Less Spend Less: Out-of-Pocket Spending Caps Protect America's Families](#)
- [Stand with Wisconsin](#) (Stand Up For Health Care Blog)
- Health Insurance Exchange Resources section - <http://www.familiesusa.org/health-reform-central/implementing-the-new-law/#Health-Insurance-Exchange-Resources>

## **8 Cost-Saving Steps States Can Take on Medicaid**

Community Catalyst sent HHS Secretary Sebelius a letter Friday outlining eight cost-saving steps states could take rather than rolling back eligibility. "To be sure, the states are in a tough position," Community Catalyst's Michael Miller tells us. "If I were a governor, I'd be a little cranky with the feds as well. ... But, that notwithstanding, there is a lot they can do to manage their Medicaid programs." Among their suggestions: increased use of generics, better integration for the dually-eligible, and evidence-based drug selection. The letter <http://bit.ly/e9vkOQ>

## **More Than Child's Play: Why Physical Activity Matters**

Last month KET premiered "More Than Child's Play", a new documentary on the childhood obesity crisis in Kentucky and the importance of creating a new culture of physical activity. Now, KET is pleased to announce the launch of an expanded companion web site! Please go to [www.ket.org/health/morethanchildsplay](http://www.ket.org/health/morethanchildsplay) to find inspirational success stories, action tips, links to helpful resources, frequently asked questions, and a downloadable discussion guide. KET is also offering free dvds to anyone willing to host a screening in their community as a catalyst for discussion and action! Many communities have already signed up. Please write to [sboston@ket.org](mailto:sboston@ket.org) to receive your free dvd and register your screening!

## **Smoke-Free KY one-pager – "Making the Case" (Attached)**

## **SEE KVH CALENDAR OF EVENTS FOR STAKEHOLDER AND OTHER ADVOCACY EVENTS -**

<http://kyvoicesforhealth.com/calendar.php>

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***Building a healthy Kentucky together!***

